

Please Complete In Full

BUSINESS FINANCIAL STATEMENT AND SUPPORTING SCHEDULES

To: FIRST STATE BANK OF BEECHER CITY • 101 CHARLES ST. • P.O. BOX 36 • BEECHER CITY, IL 62414

Name: _____ Business Phone: _____

Address: _____

Nature of Business: _____ Sole Proprietorship Partnership Corporation

The information contained in this statement is provided to induce you to extend from time to time, or to continue the extension of, credit, in any form whatever, to the undersigned. The undersigned acknowledges and understands that you are relying on the information provided herein in deciding to grant or continue credit to the undersigned. The undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. The undersigned agrees to inform you in writing immediately of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of the undersigned or (3) in the ability of the undersigned to perform its obligations to you. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned. The undersigned authorizes you to answer questions about your credit experience with the undersigned.

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 ORDER FROM Bankers Systems, Inc., St. Cloud, MN 56302
 Successor to Cadwallader & Johnson
 These forms are intended for use in commercial lending transactions.
 Where any other use is contemplated, it is suggested that a careful re-
 view be made to ensure compliance with applicable laws and regulations.



BALANCE SHEET (omit cents)		PROFIT AND LOSS STATEMENT (omit cents)	
DATED		FROM	TO
ASSETS		INCOME STATEMENT	
CURRENT ASSETS		NET SALES	\$
Cash (Schedule A)		Less - Cost of Goods Sold	
Marketable Securities (Schedule B)		GROSS PROFIT	\$
Accounts Receivable - Trade (Net) (Schedule C)		Less - Selling Expense	
Inventory (Net) (Schedule D)		General & Administrative Expense	
Other Current Assets - (itemize)		Officers' Compensation	
TOTAL CURRENT ASSETS	\$	Interest Expense	
NONCURRENT ASSETS		Depreciation Expense	
Fixed Assets (Net) (Schedule E)		Provision for Bad Debts	
Investments - Other (Schedule D)		Other Expenses: (itemize)	
Due From Officers/Employees			
Deferred Receivables			
Deferred/Prepaid Expenses			
CSV - Life Insurance (Schedule F)			
Other Noncurrent Assets: (itemize)			
TOTAL NONCURRENT ASSETS	\$	NET OPERATING PROFIT	\$
TOTAL ASSETS	\$	Plus - Other Income: (itemize)	
LIABILITIES			
CURRENT LIABILITIES			
Notes Payable - Banks (Schedule A)			
Notes Payable - Trade: (itemize)			
		Less - Federal/State Taxes	
Accounts Payable - Trade		NET PROFIT	\$
Accounts Payable - Other			
Due to Officers/Employees		RECONCILIATION OF RETAINED EARNINGS	
Taxes - Income/Other		Retained Earnings - Beginning	\$
Accrued Expenses		Add - Net Profit	
Current Portion Long Term Debt (due within 1 yr.)		Less - Net Loss	
Other Current Liabilities: (itemize)		Less - Dividends/Withdrawals	
TOTAL CURRENT LIABILITIES	\$	Adjustments	
NONCURRENT LIABILITIES		Retained Earnings - Ending	\$
Notes Payable - Long Term			
Mortgage Payable - Long Term		CONTINGENT LIABILITIES	
Other Noncurrent Liabilities (itemize)		Are any assets pledged other than those shown as pledged in the schedules on reverse? If yes, itemize:	
TOTAL LIABILITIES	\$		
Preferred Stock			
Common Stock		Are any liabilities secured other than those shown as secured in the schedules on reverse? If yes, itemize:	
Paid-in Surplus			
Retained Earnings			
NET WORTH	\$		

(OMIT CENTS)

SCHEDULE A - BANKING RELATIONSHIPS - Cash on Deposit and Notes Payable						
Name & Address of Bank(s)	Cash on Deposit	Loan/Line Amount	Original Date	Maturity	Secured or Unsecured	Current Balance

SCHEDULE B - MARKETABLE SECURITIES - (including investments in affiliates/subsidiaries)						
Description	No. of Shares/Quantity or %	Date Acquired	Pledged or Held by Other?	Is Investment Marketable?	Value	Source of Valuation

SCHEDULE C - TRADE RECEIVABLES - Selling Terms.....days			SCHEDULE D - INVENTORY - Purchase Terms.....days		
Accounts - Current		Finished Goods Work in Process Raw Materials	} Manufacturers must complete		
Past due 1 to 30 days					
Past due 31 to 60 days					
Past due 61 to 90 days					
Past due over 90 days					
Unclassified					
Total Trade Accounts					
Notes-Current		GROSS INVENTORY			
Deferred		Less - Reserve			
GROSS TRADE RECEIVABLES		NET INVENTORY			
Less - Reserve for Bad Debts					
NET TRADE RECEIVABLES					
Charge-offs in Period					
Recoveries in Period					

SCHEDULE E - FIXED ASSETS								
Description	Location	Title In Name of	Cost	Value	Source of Valuation	Accum. Depr.	Mtg. Bal.	Mtg. Maturity

SCHEDULE F - LIFE INSURANCE						
Name of Insurance Company	Insured	Owner of Policy	Beneficiary	Face Amount	Policy Loans	Cash Surrender Value

SCHEDULE G - HAZARD INSURANCE

Name(s) of Insurance Companies _____

INSURANCE: Date coverage last reviewed by an insurance broker or adviser? _____

Fire insurance on buildings \$ _____ On equipment and fixtures \$ _____ On merchandise \$ _____

Public liability on owned autos \$ _____ Property damage on owned autos \$ _____ Other \$ _____

P.L. & P.D. on non-owned autos \$ _____ P.L. on building and elevators \$ _____

Check which of the following are carried: Explosion Ins. Steam Boiler Auto Fire, Theft Business Interruption

Products liability Riot and Strike Auto Collision Workmen's Comp Robbery or Burglary Machinery Breakdown

Is the extended coverage endorsement attached to fire policies? _____

Do any policies contain a coinsurance clause? _____ Basis _____ %.

Is any insurance on a monthly reporting basis? _____ Are employees having custody or control of property adequately bonded? _____

Last independent audit by _____ as of _____ (Name of Auditing Firm) (Audit Date)

Income Tax Returns Audited through _____, 19_____

Judgments or pending litigation _____

The undersigned certifies that the information submitted to you herein has been carefully read and is true, accurate and complete.

By: _____

Title: _____

Date: _____